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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/775,868	
	Filing Date	February 10, 2004	
	First Named Inventor	Lawrence, David	
	Art Unit	3624	
	Examiner Name	Not yet assigned	
Total Number of Pages in This Submission	2	Attorney Docket Number	3499-264 (New BMT Docket No.: G08.130/U)

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Acknowledgement Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Buckley, Maschoff & Talwalkar LLC		
Signature			
Printed name	Kurt M. Maschoff		
Date	June 7, 2005	Reg. No.	38,235

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Edith Martin	Date	June 7, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): LAWRENCE

Application No.: 10/775,868

Filing Date: February 10, 2004

Title: INSIDER TRADING RISK
MANAGEMENT

) Group Art Unit: 3624
)
) Examiner: Not yet assigned
)
) Docket No.: 3499-264
) (New BMT Docket No.: G08.130/U)
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CERTIFICATE OF MAILING UNDER 37 CFR 1.8

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Dated: June 7, 2005

By:

Edith Martin

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

ADDRESS CHANGE

Dear Sir:

Please direct all future correspondence with respect to the above-identified application to:

PTO Customer Number 28062
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Respectfully Submitted,

June 7, 2005
Date

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